

DEPARTMENT OF WATER RESOURCES

NORTHERN DISTRICT
2440 MAIN STREET
RED BLUFF CA 96080-2398
(530) 529-7300

**RELEASE OF INFORMATION**

Location:

County_____

Township, Range, and Section_____

Owner at time of construction_____

Driller's name_____

Date constructed_____

Other identifying information (report no., depth, etc.)_____

Pursuant to Water Code Section 13752, I certify that I am the present owner of the above described well.

Signature_____ Date_____

Printed Name_____

Address_____

If the report is to be sent to another person, please indicate below:

Name_____

Address_____

Please sign and return in envelope provided.

Date report mailed_____

Processed by_____